FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND CAMPAIGH DISCLOSURE BEORM

DISCLOSURE SUMMARY PAGE	2008 MAR -4 F		Rev. 01/98) DISCLOSURE REPORT
		For	Office Use Only
COMMITTEE NAME (Must be same as on Statement of Organiza	ation).	Com	onn.# 9035 exed on
	The state of the s		ited
IMPORTANT: Indicate type of committee you are reporting for:		Com	nputer
 (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) Scounty PAC (6) Ballot Issue/Franchise Committee (7) County/City Cen (8) Support State of Candidates)County/Local Candidate tral Committee		
Look Dulasa	112-225-591	5	2/29/08
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATE SIGNED
Routine Penalties Due For Late F	iled Reports Range	from \$20	to \$800
SEE INSTRUCTIONS ON BACK AND COMPLETE THE F	OLLOWING SENTEN	<u> E:</u>	
1 AM FILING A 2/29/08 R	EPORT FOR AN/A (1) E	ECTION /(2)	NON-ELECTION YEAR.
(report date)		ndicate one	
CHECK IF AMENDMENT TO REPORT DATED	8	Local Comm	nittees, enter Date of Election
Charles this is fined the wind that a second of the blood of the second of the blood of the second o	in all the Free DD 0	County & Lo	cal Committees, enter County in
Check if this is final (termination) report and attach Notice of D (You must continue to file reports until a Notice of Dissol		which Election	
,	,		
STATEMENT O CASH ON HAND at the beginning of the reporting period. (This is	F CASH ON HAND		
of all monies held by the committee. This amount MUST same as the cash on hand at the end of the last reporting or must be zero if this is first report filed.)	g period.	\$_	354,29
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule	A)		1080,00
Schedule F: Loans Received total (Attach Schedule F).			
Schedule H: Total Sales of Campaign Property (Attach	Schedule H)		
(Schedule H applies to Candidates' Committee	ees Only)		
	SUB-TO	TAL \$	143429
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	•	-	
Schedule B: Expenditures total (Attach Schedule B)			377.59
Schedule F: Loan Repayments total (Attach Schedule F)	·····-	
CASH ON HAND at the end of this reporting period (if final report be zero) (Attach DR-3)	, balance must	\$	1056.70
UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule	E)	\$	
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)		\$	
CANDIDATE COMMITTEES ONLY:			
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE	
SCHEDULE	
A	MONETARY
(Rev. 06/97)	RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
11/19/07	CK# 8589	Lynde Lundquist Saul HAUR Cleghorn i IA 51014		\$ 100,00	·
12/4/07	CK# 6760	Nancy Martin 700 Walnut Charokee, IA 51012		25%	
12/7/07	_{СК#} 7977	Todd Anderson 307 Lauri Lane Cherokee JA 51012		10000	
12/8/67	CK# 1933	Carolyn Troth HIY Indian st Cherokes, IA 51012		100.5	
12/8/07	1D# 8686	Ron Wetherell 300 S. Oak St Cleghorn, IA 51014		2500	
12/8/07	CK# 7343	Dan Husmon GIHH Y AUR Aurelia IA 51005		a5 %	
19/8/07	CK# 5098	Stan Oswald 4632 I Ase Cleyhorn, IA 51014		25%	<i></i>
12/9/07	CK# 9601	Cleyhorn, IA 51014 Donothy Roych 5 Annow St Cherokee, IA 51012		30%	
12/8/07	CK# 8231	Lois Hobson 1 Arrow st Cherokee, IA 51013		1400	1
15/8/01	CK# 1470	Lois Person 1 Slow Volley Dr Chemkee TA 51012	·	1400	
			SUB-TOTAL	11119	

TOTAL (if last page of this schedule)

Page _____ of ____

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	***
Cherekee County Reachlican Central	\wedge
- NEIGHGE (OUISHIY HERKINI) (OU (ENTW)	CHANA

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
Q CHE	CK THIS BOX IF
AME	NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	DEL ATIONICI III		
RECEIVED (MM/DD/YR)	(if applicable)	STATE OF STA	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR
(MINDU/TH)	AND PAC CHECK NUMBER		(if applicable)	, ILOLIVED	FUND- RAISER
1 .	ID#	2 4 6			INCOME
12/8/07		Scott Corrie 1252 Office Pork RD. Apt 17			
	CK#			\$	<i>₹</i>
	10#	West Des Moines, IA 50365		1500	
12/8/07		Bob Simonsen			
	CK# 8340	1567 Baoth St.		CO	·
	1D#	Cherokee, ZA 51012		25%	
. 1.1	10π	Beu Zieman			
12/8/07	CK# 1131-	1325 Greta St #4		_	
	CK# 4367	Cherokee, JA 51012		25%	-
12/8/07	ID#	Lynde Lundowist			
10101	CK# C.~C-	Lynde Lundquist 5446 H AJe		Jon.	
	^{CX#} 8593	Cleahorn, IA 51014		50°	1
12/8/07	ID#	Bil Anderson			
1 010 1	CK#	1138 Mason Ave			
	5301	Picson, TA 51048		30°°	-
12/8/07	ID#	Tom Oswald			ļ
1010101	CK#	909 470 th St		_	
	3033	Cleahorn, IA 51014		25°	-
_	ID#				
12/8/07	CK#	Yvonne Veen camp			
	19994	Chorokee, IA 51012		2509	-
	ID#	Donna Hicks			
19/8/07	CK#	P.O. Box 901			
19/0/01	3242	Cherokes, IA 51012		2509	-
	ID#			43	
121-1	01411	Joe Lundsgoord			
12/8/07	CK# 6131	Goo centendial Dr.		25°	
	ID#	Cherokee IA 51012		45	
12/8/07	·	Leroy Schoon 1479 Harrison Dr.		,	
.01010	CK# 379			25º0	
	311	Charokee, IA 51012		45	
			SUB-TOTAL	22-00	

TOTAL (if last page of this schedule) king a contribution to the

Page <u>a</u> of <u>a</u> (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR			
RECEIVED	(if applicable)	TO THE PARTY ASSESSED OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR
(MM/DD/YR)	AND PAC CHECK		(if applicable)	HECEIVED	FUND- RAISER
	NUMBER				INCOME
1 1 - 1 -	ID#	Missy Leads 100 Park Ridge			
12/8/07	CK#	100 Park Ridge		\$	1
	3896	Charotee, It 51012	·	25.00	1
	ID#				
12/8/07	CK#	1479, Harrison Dr.			_
1 401	5840	Cherokee, IA 5/012		2500	-
	ID#			03	<u> </u>
12/8/07	CK	Curt Golnick 507 Clark St.			
1 10101	ск# 54a7	Place Lank Sh		2500	1
	ID#	Cherokes, JA 51012		95	
12/8/07		Loose Money Collected		16300	
(0)	CK#	, ,			(
	ID#	at December 8th Fundraise			
	CK#				
	ID#				
	15"				
	CK#				
	104				
	ID#				
	CK#				
	ID#				
	CK#				
,					Ş
	ID#				
,	CK#				
				1	
	ID#				
	CV.				
	CK#		·		1
					1

SUB-TOTAL

TOTAL (if last page of this schedule)

(for Schedule A)

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CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

(Rev. 06/97) RECEIPTS CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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Virlo7	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
North Depth South Sout	411/07	9014	Alta Towa 51002	·		V
IU#	3/22/07	CK# \771	Korl + Barb G: lbertson 1609 Rainbow Dr. Codor Falls, IA 501013			W
CK# ID# ID# ID# ID#		CK#				
CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# CK#		CK#			,	
CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# ID# CK#		CK#		-	·	
CK# ID# CK# CK# ID# ID# ID#		CK#				
CK# ID# CK# ID#		CK#				
CK#	·	CK#				
		CK#				

SUB-TOTAL

TOTAL (if last page of this

schedule)

SCHEDULE A

MONETARY

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

MONETARY XPENDITURES

IN AND THE CHECK THIS BOX IF AMENDING FORM

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
			dral Comm,	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
3/4/07	CK# 908	Holton Cuation Signs Cherokee IA 51012	Window (Fair booth Sign	\$ (58.00
7/5/07	CK# 409	Cherokee County Fein Cherokee, IA 51012	Booth Rand	50.00
7/13/07	ID#	Hyrveo Food Stores Charokee. IA 51012	Ice Croam/cups/Ice and Candy for Fair Booth	39.54
7/24/07	CK# 91/	Marcus Community Fair Marcus ITA 51035	Booth Rent	20.09
11/14/07	CK# 6/19	Perkins assice Solutions Charokee, IA 51012	Taper T Intocher	35, 3 <i>[</i>
4/19/07	CK# 913	Penkins office Solutions main St. Cherokee, IA 51012	Copies	3,74
ulialor	ID# CK# (3) (4) ID#	U.S. Post Office Willow St. Cherokes, TA 51012	100 Stamps	41.00
	CK#			
			SUB-TOTAL	\$ 377,59
			TOTAL (if last page of this schedule)	\$ 377 69

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	_1	of	(<u>'</u>
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